

## RESOURCES:

#### Additional benzo resources:

https://psychonautwiki.org/wiki/Benzodiazepine

http://benzo.tripsit.me/

http://drugs.tripsit.me/alprazolam

#### **Drug Combinations:**

https://wiki.tripsit.me/images/3/3a/Combo 2.png

#### Pill identifier:

https://www.drugs.com/pill\_identification.html

#### **Fentanyl Checking Strips:**

https://dancesafe.org/product/fentanyl-test-strips-single-strip/

#### Naloxone locator:

http://www.getnaloxonenow.org/find.html

# DEPENDENCE & TAPERING:

Benzodiazepines are known to be extremely physically and psychologically addictive.

Tolerance will develop to the sedative-hypnotic effects within a few of days of continuous use. After cessation, the tolerance returns to baseline in 7-14 days. Withdrawal symptoms or "rebound symptoms" may occur after ceasing one's usage abruptly following a few weeks or longer of steady dosing, and may necessitate a gradual dose reduction. Anxiety may present itself after a few days of regular use, so if you are looking to avoid dependence, a good method is to ensure you're not using more than 3 days in a row, or are alternating other drugs (such as dissociatives) to avoid dependence and unpleasant side effects of withdrawal.

If you've noticed yourself develop a tolerance and want to quit, it's best to taper down off of benzos. Quitting abruptly with too much of a dependency can be deadly at worst and unpleasant at best. The sudden discontinuation of benzodiazepines can lead to life-threatening seizures for individuals who have been using them regularly, in heavy doses, or for extended periods of time.

At best it can cause anxiety at a level bordering on complete break down and can cause suicidal ideations. For this reason, it is recommended to discontinue use by tapering one's dose by gradually lowering the amount taken each day for a prolonged period of time instead of stopping one's usage abruptly.

## **INTRO TO BENZOS:**

#### CLASS:

Benzodiazepines (commonly referred to as "benzos") are a class of psychoactive substances that act as central nervous system depressants. These substances work by magnifying the efficiency and effects of the principal inhibitory neurotransmitter gamma-aminobutyric acid (GABA) by binding to and acting on its receptors. (citation: Psychonaut wiki)

#### HISTORY:

The first benzodiazepine was synthesized in the 1950s by Leo Sternbach and by the 1970s had largely replaced the use of barbiturates due to their sedative, anticonvulsant, and muscle relaxant effects.

#### **COMMON FORMS:**

Lots of people recreationally use benzodiazepines (xanax, klonopin, valiun ativan, etc), or are prescribed benzos and recreationally use other drugs.

If you want to stay safe, this guide is

## INTRO TO BENZOS (cont'd):

The characteristic effects of benzodiazepines include anxiety suppression, sedation, muscle relaxation, loss of inhibition, sleepiness, and amnesia. In a medical context, short-acting benzodiazepines are typically recommended for treating insomnia or acute anxiety or panic attack disorders while long-acting ones are recommended for the treatment of anxiety disorders. Due to their sleep inducing properties, taking more than prescribed can lead to blacking out and memory loss!

Benzos are a depressant. This means combining things like Xanax with alcohol, GHB, ketamine, some muscle relaxers, other sedatives, and opiates or any combination thereof can get deadly, quickly. Take your other drugs first, then wait to see if you need benzos (if using recreationally). If you're taking other prescription medication, make sure to look up how those drugs might interact. A good drug combination resource can be found in the resource section (last page) of this zine.

ROA'S: EAT IT!

Mostly typically, benzos are dosed orally (swallowed, parachuted, or absorbed sublingually in a solution). The vast majority of readily available benzos are not water soluble and therefore aren't ideal for injecting or snorting. Many people create liquid solutions using propylene glycol or alcohol solutions, but these are not advised to be injected or snorted, and should be used for sublingual absorption or oral consumption (eating) ONLY.

#### DON'T INJECT THEM!!!!!!!!!!

Attempting to inject those solutions can lead to serious cardiovascular dysfunction. Some water soluble benzos exist, but are largely restricted to hospital settings. Attempting to inject non-water soluble benzos have been reported to largely diminish the rush, as opposed to other classes of drugs like opioids and stimulants. Citric acid/vinegar are not effective methods for breaking down benzos to shoot, unlike crack.

Similarly, booty bumping wouldn't be ideal for this form of drugs because to dissolve the benzo appropriately you need a fill that isn't advised to be administered rectally.

For faster absorption, you can try crushing your pills and absorbing them under your tongue.

### NARCAN & DRUG CHECKING

Naloxone (Narcan) reverses opioid (fentanyl is an opioid) overdoses and you can save a life just by having it. It can't hurt someone, and it can keep them alive long enough to get them medical attention. If you're using opiates and benzos, tell someone where your naloxone is, so they can use it if they need to!

If you're intentionally using both: **USE YOUR DOPE FIRST**. You can always add more benzos, it's harder to take away the benzos, and at times benzos can alter your perception of time and doses of opiates.

Even when a person has blacked out, some folks can still walk and talk and will continue to consume substances. Some people have a strong "auto pilot" and function just fine while blacked out. Some people do not. We strongly urge you to have a buddy to ensure your safety if using benzos at high doses.

<u>Narcan will not reverse the effects of the benzos</u>, but eliminating the opioids from your receptors is sometimes enough when using both to allow a person to come back. and start breathing again.

## Research Chemicals (RCs) Benzos

Research chemicals available on the internet are becoming more and more popular. These chemicals are most typically benzo analogues (bromazolam, clonzelam, etc) and are EXTREMELY potent and must be measured to be consumed safely. Stop by your local needle exchange and use insulin syringes to measure your dose. You will want a 1-cc (100 unit) syringe to measure these substances. Check Psychonaut Wiki or Bluelight for common doses. A standard 100unit syringe should be precise enough to measure these substances safely. Each tick on a 100 unit (1cc) syringe is equivalent to 10 micrograms. Triple check any calculations against forums online, in case your calculations are off.

Dosing liquid benzos with syringes can be a good option. But remember – shooting benzos can lead to SERIOUS cardiovascular repercussions and wastes your drugs. For the quickest absorption of liquid benzo analogues (or liquid alprazolam), squirt the solution from the syringe into your mouth, beneath your tongue. It should only take about 15-20 minutes to kick in, and is extremely effective. Try to avoid redosing until the first dose hits, and set limits before redosing compulsively.

### DRUG CHECKING FOR FENTANYL:

The important thing to understand is that you're checking the drug **residue** for any presence of fentanyl of fentanyl analogues. *These strips were developed initially as tools for law enforcement to use on urine, so they're VERY sensitive*. To check drugs appropriately, you'll be diluting the residue. So, for pressed pills and all substances except meth and MDMA, that's going to look like adding half a cooker's worth of water (~400 units or 4 syringes worth of water) to a cooker (pictured below), and placing the strip into the solution (do not submerge the strip past the blue dotted line). We're now learning more about these strips, and experts are telling us we need to dilute meth and MDMA in 1/2 cup of water.



Credit: SFDUU for image

Ideally, you would check a pressed pill BEFORE you use it. If you get a positive result: ensure there's someone around with Narcan who knows where it is and how to use it. Fentanyl and benzos are an extremely lethal combination, so be careful AND PREPARED!

## HARM REDUCTION TIPS: AVOIDING OVERDOSE & DEPENDENCY

Benzodiazepine overdose is a medical emergency that may lead to a coma, permanent brain injury, or death if not treated promptly and properly. On their own, benzos are relatively safe, even when taking higher doses than prescribed.

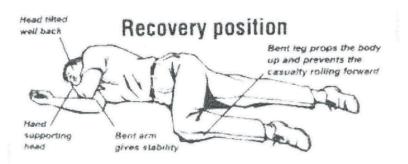
However, when taking regular doses of benzos, memory loss is a common side effect, and when taking over the prescribed amount or combining drugs, blacking out is easy to do. Having a friend around to ensure you don't enter dangerous situations while blacked out can be imperative. A good way to prevent taking your whole stash at once is to dose and leave the rest with a trusted friend or in a place you can't access.

Avoid leaving dosing decisions to when you're fucked up. Very large quantities (speculated at several hundreds to a thousand milligrams of alprazolam or its equivalent) of benzo dosing can lead to death.

The most common risk presented by benzos is when they are mixed with other classes of drugs. Mixing with other depressants or "downers" can lead to respiratory depression (overdose). Mixing with stimulants in high doses also presents a risk because your body is trying to regulate itself while drugs are sending it both up and down at the same time. You are more susceptible to heart attack or overdose when mixing substances.

## HARM REDUCTION TIPS: AVOIDING OVERDOSE & DEPENDENCY

\*\*\*GENERALLY SPEAKING: it's not a good idea to try to use stimulants to "wake up" if you've taken too large of a dose of benzos. While benzos are regularly used to come down off of stimulants and psychedelics, going the other way isn't advised. It essentially creates a speedball in your central nervous system which can be difficult for some people's hearts to handle. If you take too much of a benzo, we highly recommend sleeping it off, and using the recovery position (laying on your side to avoid aspiration) - or having someone check on you periodically to ensure you're still breathing. \*\*



## PRESSED PILLS & FENTANYL

Non-pharmaceutically produced (often referred to as "pressed" or "fake") Xanax might have some of the following qualities:

- Different taste than pharmaceutically produced Xanax (lacks bitter taste associated with alprazolam)
- Dosages are discolored or thicker than prescription pills (ex. Black speck in a yellow bar)
- Rectangular pills that break into three parts instead of four
- May dissolve when held or have a less rigid structure
- Asymmetrical in shape
- Chalky odor or consistency, indicating filler is present
- Lacks glossy coating

\*\*\*\*It's important to note: "fake" Xanax is a misnomer for pressed pills that aren't pharmaceutically produced. While they may not be homogenous (have the actual active substance evenly distributed across the pill), these types of pills often times contain active doses of benzos and frequently have more than anticipated.

Due to the illegality of drugs and an inability for some manufacturers to properly clean equipment, many pressed pills are turning up positive for fentanyl. In many cases, some pills are intended to contain fentanyl and end up being sold as Xanax on accident.

Regardless of how it gets to you, always test a little chunk of a pill before ingesting. You can drink the solution you tested and lose none of the original pill.\*\*\*\*\*